Identify filters for models search: Local, national, international

* policy think tanks and lobby groups (3)
* research institutes (3)
* partnership models (between HSO) (3)
* social innovation labs (3)
* Are there any other ‘research and policy hubs’ that already exist? (3)

**Examples of research policy hub for vulnerable families:**

1. **Bronfenbrenner Center for Translational Research initiative: Cornell Project 2Gen: USA**

* Mission: for Translational Research is to expand, strengthen, and speed the connections between cutting-edge research and the design, evaluation, and implementation of policies and practices that enhance human development, health, and well-being.
* Link: <http://news.cornell.edu/stories/2017/10/new-initiative-launched-support-vulnerable-families>
* “Project 2Gen is going to be a hub of innovative work that brings together research, practitioners and policymakers, developing and carrying out work in this area, testing new approaches, evaluating their effectiveness, and implementing them locally and throughout the state,”

1. **Policies for action research hub: USA**

* Link: <https://iwpr.org/issue/special-websites/iwpr-berkley-research-hub/>
* “the Institute for Women’s Policy Research and the University of California, Berkeley, focuses on income enhancement and workplace policies that help working parents, especially the most vulnerable, to have the time and financial resources to protect and invest in their family’s health. The hub has developed a research portfolio that investigates: (1) economic policies that enhance the family incomes and health of low wage workers, and (2) workplace regulations and leave policies that allow all workers to care for their families in times of special need and enhance their health.”

1. **Health management associates: Interagency, Cross-Sector Collaboration to Improve Care for Vulnerable Children:  Lessons from Six State Initiatives: USA**

* Link:   <https://www.lpfch.org/sites/default/files/field/publications/hma_interagency_collaboration_national_report_02.15.2018.pdf>
* This resource has different examples of partnership models between organizations in the USA. Completed February 2018! “Key factors that contribute to successful collaboration, based on the six programs’ experiences, are summarized in Table 4.11  (While there is some overlap with the “motivating factors” discussed above, here we focus on ingredients for ongoing collaboration.) Sustainable structures, such as state legislation, commitment of resources, and establishment of cross-agency committees, were deemed essential factors in all six programs examined. Some type of interagency agreement to share data, with common metrics and goals, played a critical role in most of the programs. Other ingredients that were essential to establish and sustain the collaborative efforts are: state directives and/or assistance to collaborate across systems at the regional or local level (such as data sharing or leveraging/sharing resources); strong leadership and buy-in from “above” (e.g., Governor, Medicaid director) and “below” (e.g., state agency staff, families and advocates); and effective project management techniques emphasizing transparency and realistic timelines and goals.”
* Key learnings for organizational collaborations pg. 19
* “The purpose of this study was to identify and examine promising state interagency efforts, and assess key ingredients, challenges, and lessons for other states. The objective is to promote collaboration across systems serving CYSHCN or other vulnerable populations that could **reduce fragmentation and duplication of services, improve coordination of and access to needed services and supports, and ultimately improve health outcomes and contain costs.”**

1. **National Improvement Hub: Scotland**

* What: The Hub provides information and support that enables practitioners to improve their practice and increase the quality of learners’ experiences and outcomes. It provides access to: self-evaluation and improvement frameworks, research, teaching and assessment resources, exemplars of practice and support for on-line collaboration and networks through Glow.
* Mission:
* Key principles:
* **The Hub will be designed around the needs of practitioners**   
  2. **The Hub will deliver core information/services to support improvement**   
  3. **The Hub will be developed collaboratively with practitioners**   
  4. **The Hub and its content will be simple to use and understand**   
  5. **The language and design of the Hub will be consistent**   
  6. **The Hub will make things open.** We should share what we’re doing whenever we can. The more eyes there are on a service the better it gets - better alternatives are pointed out, the bar is raised.
* Content publication rules:
* All Hub content has an identified content owner
* There is a minimum requirement that content is reviewed and updated on an annual basis
* As a rule of thumb content will be removed after two years
* Information about Hub content will be regularly provided through Education Scotland communication channels, including social media
* Opportunities will be provided for practitioners to collaborate around Hub content, for example Glow based YamJams​
* Link: <https://education.gov.scot/improvement/research/Engaging%20with%20families>

1. **Resource on “what works” in social service collaboration for HSO and ‘vulnerable people’ From the Families commission in New Zealand\* Good resource\***

* Link: <https://thehub.sia.govt.nz/assets/Uploads/WW-Integrated-services-0.pdf>

1. **Think tanks listed by McGill University in Canada**

* Link: [chrome-extension://oemmndcbldboiebfnladdacbdfmadadm/https://mcgill.ca/caps/files/caps/guide\_canadianthinktanks.pdf](http://chrome-extension/oemmndcbldboiebfnladdacbdfmadadm/https:/mcgill.ca/caps/files/caps/guide_canadianthinktanks.pdf)

1. **Large network of examples from Canadian policy and research networks / organizations**

* Link: <https://charityvillage.com/cms/organizations/research-and-policy-development>

Additional specified links:

1. **Calgary Chamber of Voluntary Organizations**

* Vision: A vital, dynamic nonprofit sector that is recognized and respected as an integral partner in building strong, healthy communities.
* Missions: CCVO promotes and strengthens the nonprofit sector by developing and sharing resources and knowledge, building connections, leading collaborative work, and giving voice to critical issues affecting the sector.
* Strat plan: 2019-2021: [chrome-extension://oemmndcbldboiebfnladdacbdfmadadm/https://static1.squarespace.com/static/5aef5b46cef3728571e6c46c/t/5c474bd2b914435393c99468/1548176338670/2019-21+Strategic+Plan.pdf](http://chrome-extension/oemmndcbldboiebfnladdacbdfmadadm/https:/static1.squarespace.com/static/5aef5b46cef3728571e6c46c/t/5c474bd2b914435393c99468/1548176338670/2019-21+Strategic+Plan.pdf)
* Link: <https://www.calgarycvo.org/about-ccvo>

1. **Canadian Centre for policy alternatives**

* What: The Canadian Centre for Policy Alternatives (CCPA) is an independent, non-partisan research institute concerned with issues of social, economic and environmental justice. Founded in 1980, the CCPA is one of Canada’s leading progressive voices in public policy debates.
* The CCPA produces the research and analysis necessary for policymakers, activists, and everyday Canadians to make informed decisions and press for social change.
* Funding: The CCPA is a registered non-profit charity. We depend on the support of our more than 12,000 supporters across Canada.
* Current research topics: <https://www.policyalternatives.ca/projects>

1. **CCSD**

* What: CCSD is a not-for-profit organization that partners and collaborates with all sectors (not-for-profit, philanthropic, government and business) and communities to advance solutions to today’s toughest social challenges. “We are neutral, non-partisan, non-governmental and independent.”
* Design thinking, blending all three sectors (private, public and not for profit), advocating for a holistic evidence base, hosts an ideas incubator, problem solving project zone
* Listed values:
* Focus above all else on achieving the social outcome needed – rethinking and reframing both problem and solutions until we find the answer
* Take a rigorous, evidence based, creative and interdisciplinary approach to our work
* Educate, demonstrate, innovate and evaluate - integrating practice, applied research, and public policy
* Approach our work with an entrepreneurial, goal-oriented approach, with a strong commitment to integrity, to diversity in all forms, and learning by listening, acting, and constant self-improvement
* Vague mission/ vision:Our intent and desire is to grow the Collaboratory model, both physically and virtually**,** convening diverse sectors and groups of citizens in human-centric, creative and evidence-based environments. There, they would rethink and reframe current problems and challenges relevant and of priority to their communities, and co-create innovative and scalable solutions. Reframing the issues is critically important to the identification of novel solutions and social innovations.
* Link: <http://www.ccsd.ca/index.php/design>

1. **Institute for research on public policy (IRPP)**

* Mission: Founded in 1972, the Institute for Research on Public Policy is an independent, national, bilingual, not-for-profit organization. The IRPP seeks to improve public policy in Canada by generating research, providing insight and informing debate on current and emerging policy issues facing Canadians and their governments.
* Funding: The Institute’s independence is assured by an endowment fund, to which federal and provincial governments and the private sector contributed in the early 1970s.
* How/ why: The Institute continues to be at the heart of Canada’s most important policy conversations in areas such as innovation, Canadian federalism, income inequality, global commerce, population aging and pension reform. To carry out this mission, we publish peer- reviewed research; act as a convenor of policy debates through conferences, round tables and panel discussions; and we collabo-rate with researchers in academia and government to identify and examine the major policy challenges on the horizon.
* 2018 annual review: [chrome-extension://oemmndcbldboiebfnladdacbdfmadadm/https://irpp.org/wp-content/uploads/2018/09/annual-report-2018.pdf](http://chrome-extension/oemmndcbldboiebfnladdacbdfmadadm/https:/irpp.org/wp-content/uploads/2018/09/annual-report-2018.pdf)

1. **Alberta Family Wellness Initiative**

Type/ What: The Alberta Family Wellness Initiative (AFWI) mobilizes knowledge about early brain development and its connection to lifelong physical and mental health, including addiction. We bring together stakeholders from many callings to collaborate on health solutions that will directly impact families and individuals.

Location: Alberta

Scope: Local, provincial, national and international (impact)

Mission:

Vision: Linking Science, policy, and practice to improve public health

Key objectives:

* Improve outcomes for children and families.
* Promote scientific knowledge in the service of improving performance of human systems.
* Provide sustained commitment.
* Stay people-centred.
* Scan the field constantly for opportunities to make a difference and keep an open door to people and their ideas.
* Work at the highest level of excellence and quality, engage top experts worldwide and locally, provide first-rate support to all participants, and create a generous and generative learning space.
* Work toward systems change.
* Test assumptions, learn, and adapt.
* Communicate how experiences in early childhood and other sensitive periods of development contribute to outcomes.
* Communicate the intergenerational cycle of these experiences.
* Be a resource.
* Enable partners to take the lead in enacting these principles.
* Expect defensiveness and resistance and don’t be overwhelmed or discouraged.

Funding model: Started by the Palix foundation

Operating budget:

Primary funding source: Palix foundation / government support?

Board functioning/ Advisory council: The Alberta Family Wellness Initiative (AFWI) Advisory Council was established to help the AFWI carry out its work. In addition to expertise, Advisory Council members bring a wider, external perspective to the development of projects, strategies, and partnerships.

***THE ADVISORY COUNCIL HAS FOUR DUTIES:***

* To initiate strategic advice on the direction of the AFWI and its projects, and to identify synergies between projects.
* To offer advice to the AFWI on current and emerging issues, standards, and practices in early childhood development, and addiction and mental health.
* To advise on additional areas of work that could enhance the objectives of the AFWI.
* To identify synergies with organizations in Canada and internationally.

CEO name: Michelle Gagnon

Number of staff: 10 managers / organizational leaders

Theory model: Brain story science: Trauma informed model. “Lifelong health is determined by more than just our genes: experiences early in life and at other sensitive periods of development change our brains in ways that make us more or less vulnerable to health problems across the lifespan.”

Theory of philanthropy (TOR): 3 main organizing principles- AFWI is a:

1. **Knowledge Entrepreneur**   
   The AFWI mobilizes the latest scientific knowledge about brain development, addiction, and lifelong mental health to create [change agents](https://www.albertafamilywellness.org/what-we-do/theory-of-change/): individuals who will use this knowledge to change what is done in policy and practice.
2. **Catalytic Convenor**   
   By maintaining links with a cross-boundary body of change agents from a range of sectors and disciplines, including academia, health, human services, justice, and education, the AFWI creates opportunities: first, for people to access knowledge about brain development in forms that are usable for policy-makers and practitioners; and second, to build communities of practice by funding research, professional development days, and other projects that advance the application of knowledge. In addition, the AFWI funds projects that will provide evidence for further insight and understanding.
3. **Partner to Public and Community Systems in a Learning Journey**   
   The AFWI provides sustained advice and support—using a flexible, responsive approach—to managers and decision-makers in these systems and communities, with the goal of catalyzing change in policy, service provision, and on-the-ground practice.

Theory of change: Link: <https://www.albertafamilywellness.org/what-we-do/theory-of-change>

The AFWI’s strategy is built on mobilizing knowledge—the process of disseminating key scientific information into a form that can be used and applied. This process works in three interdependent phases:

1. The Initiative shares the [Brain Story](https://www.albertafamilywellness.org/what-we-know/the-brain-story/) (an interdisciplinary body of knowledge about early childhood experiences, brain development, epigenetics, intergenerational factors, and outcomes) with **individuals** in relevant sectors and systems.
2. These individuals become **change agents** who apply their new knowledge to their **organizations** and disseminate it in their spheres of influence.
3. As organizations begin to shift their cultures, priorities, and practices, change begins to occur in policies, resource allocations, and institutional relationships at the **system** level.

Changing individuals, changing organizations, changing systems

Link: <https://www.albertafamilywellness.org/>